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Atty. Dkt. No. 044123-1633

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**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: Floyd et al.  
Title: ROOF SUPPORT WITH INTEGRAL GUTTER  
Appl. No.: To be determined  
Filing Date: To be determined  
Examiner: To be determined  
Art Unit: To be determined

CERTIFICATE OF EXPRESS MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Commissioner for Patents, P.O. Box 2327, Arlington, VA 22202.	
EL 716397120 US (Express Mail Label Number)	1/10/02 (Date of Deposit)
Chris Escavaille (Printed Name)	
<i>Chris Escavaille</i> (Signature)	

**UTILITY PATENT APPLICATION**  
**TRANSMITTAL**

**Box NEW PATENT APPLICATION**

Commissioner for Patents  
U.S. Patent and Trademark Office  
P.O. Box 2327  
Washington, D.C. 22202

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

Gregory Floyd  
3066 Crater Road  
Wooster, Ohio 44691

Robb Willgoohs  
4325 10th Avenue South, #211  
Fargo, North Dakota 58103

Enclosed are:

- Specification, Claims, and Abstract (17 pages, plus cover sheet).
- Formal drawings (3 sheets, Figures 1-6).
- Declaration and Power of Attorney (4 pages).

The filing fee is calculated below:

	Claims as Filed	Included in Basic Fee	Extra Claims	Rate	Fee Totals
Basic Fee				\$740.00	\$740.00
Total Claims:	24	- 20	= 4	x \$18.00	= \$72.00
Independents:	3	- 3	= 0	x \$84.00	= \$0.00
If any Multiple Dependent Claim(s) present:				+ \$280.00	= \$0.00
				SUBTOTAL:	= \$812.00
[ ]				Small Entity Fees Apply (subtract ½ of above):	= \$0.00
				TOTAL FILING FEE:	= \$812.00

- [ X ] A check in the amount of \$812.00 to cover the filing fee is enclosed.
- [ X ] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

By Jason E. Pauls  
 Jason E. Pauls  
 Attorney for Applicant  
 Registration No. 45,651

Date Jan. 10, 2002

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